

CJA 24 AUTHORIZATION AND VOUCHER TRANSCRIPT

1. CIR./DIST./DIV. CODE 0090		2. PERSON REPRESENTED JOHN HERBERT STRAND		VOUCHER NUMBER 0090.1561858		
3. MAG. DKT./DEF. NUMBER		4. DIST. DKT./DEF. NUMBER 1:21-CR-00085-1-CRC		5. APPEALS DKT./DEF. NUMBER 23-3083		
6. OTHER DKT. NUMBER		7. IN CASE/MATTER OF (Case Name) USA v. STRAND et al		8. PAYMENT CATEGORY Felony (including pre-trial diversion of alleged felony)		
9. TYPE PERSON REPRESENTED Adult Defendant		10. REPRESENTATION TYPE Criminal Case		11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) <i>If more than one offense, list (up to five) major offenses charged, according to severity of offense</i> 18:1512C.M		
REQUEST AND AUTHORIZATION FOR TRANSCRIPT						
12. PROCEEDING IN WHICH TRANSCRIPT IS TO BE USED (Describe briefly) Sentencing and Appeal						
13. PROCEEDING TO BE TRANSCRIBED (Describe specifically). NOTE: The trial transcripts are not to include prosecution opening statement, defense opening statement, prosecution argument, defense argument, prosecution rebuttal, voir dire or jury instructions, unless specifically authorized by the Court (see Item 14.) Trial - opening through closing through to verdict. Sep. 20, 21, 22, 23, and 26, 2022						
14. SPECIAL AUTHORIZATIONS					JUDGE'S INITIALS	
A. Apportioned 0% of transcript with (Give case name and defendant)						
B. <input type="checkbox"/> 14-Day <input type="checkbox"/> Expedited <input checked="" type="checkbox"/> 3-Day <input type="checkbox"/> Daily <input type="checkbox"/> Hourly Transcript <input type="checkbox"/> Realtime Unedited Transcript						
C. <input checked="" type="checkbox"/> Prosecution Opening Statement <input checked="" type="checkbox"/> Prosecution Argument <input checked="" type="checkbox"/> Prosecution Rebuttal <input checked="" type="checkbox"/> Defense Opening Statement <input checked="" type="checkbox"/> Defense Argument <input type="checkbox"/> Voir Dire <input checked="" type="checkbox"/> Jury Instructions						
D. In this multi-defendant case, commercial duplication of transcripts will impede the delivery of accelerated transcript services to persons proceeding under the Criminal Justice Act.						
15. ATTORNEY'S STATEMENT As the attorney for the person represented who is managed above, I hereby affirm that the transcript requested is necessary for adequate representation. I therefore request authorization to obtain the transcript services at the expense of the United States pursuant to the Criminal Justice Act. _____ Signature of Attorney _____ Printed Name Stephen Brennwald Telephone: 301-928-7727 _____ Date 05/09/2023 13:39:05			16. COURT ORDER Financial eligibility of the person represented having been established to the Court's satisfaction the authorization requested in item 15 is hereby granted. _____ Signature of Presiding Judicial Officer or By Order of the Court _____ Date of Order 05/24/2023 07:13:13 _____ Nunc Pro Tunc Date			
CLAIM FOR SERVICES						
17. COURT REPORTER/TRANSCRIBER STATUS <input checked="" type="checkbox"/> Official <input type="checkbox"/> Contract <input type="checkbox"/> Transcriber <input type="checkbox"/> Other			18. PAYEE'S NAME Lisa Moreira MAILING ADDRESS (First Name, M.I., Last Name, Including any suffix). 333 Constitution Avenue NW Washington, DC 20001 Telephone: 202-354-3187			
19. SOCIAL SECURITY OR EMPLOYER ID NUMBER OF PAYEE XX-XXXXXXX						
20. TRANSCRIPT	INCLUDE PAGE NUMBERS	NO OF PAGES	RATE PER PAGE	SUB TOTAL	LESS AMOUNT APPORTIONED	TOTAL
Original	-----					
Copy	1-1262	1262	\$0.90	\$1,135.80	\$0.00	\$1,135.80
Expense (Itemize)						
TOTAL AMOUNT CLAIMED						\$1,135.80
21. CLAIMANT'S CERTIFICATION OF SERVICE PROVIDED I hereby certify that the above claim for services rendered is correct, and that I have not sought or received payment (compensation or anything of value) from any other source for these services. Signature of _____ Lisa A. Moreira /S/ _____ Date 5/25/2023						
ATTORNEY CERTIFICATION						
22. CERTIFICATION OF ATTORNEY OR CLERK. I hereby certify that the services were rendered and that the transcript was received. _____ Signature of Attorney or Clerk Stephen Brennwald /S/ _____ Date 05/26/2023 12:28:29						
APPROVED FOR PAYMENT - COURT USE ONLY						
23. APPROVED FOR PAYMENT _____ Signature of Judicial Officer or Clerk of the Court Christopher R. Cooper /S/ _____ Date 06/09/2023 06:16:33				24. AMOUNT APPROVED \$1,135.80		

Voucher Services Detail

Date	Service Type	Description	Incl. Page Numbers	No. of Pages	Rate Per Page	Apportioned	Adjusted	Total	Audit Amount	Audit Notes
5/25/2023	Copy	Copy of trial transcripts	1-1262	1262	\$0.90	\$0.00	\$0.00	\$1,135.80		

Voucher Expenses Detail

No Expenses Reported

Submission NotesPublic Notes

5.26.23. All transcripts were provided as requested so this voucher should be paid in full. SFB

Private Notes

(No Notes)